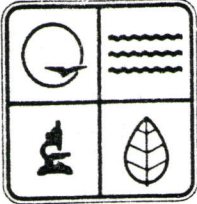


File

MoDOS 872204



MEMORANDUM

DATE: March 1, 1984

TO: Waste Management Program, Enforcement Staff

FROM: *BM* Bruce Martin, thru Rick Roberts *RFR* thru James Burris, PBRO

SUBJECT: 1.300 WEST PLAINS - Eaton Control Plant

Please find attached an "Uncontrolled Hazardous Waste Site Inspection" for the Eaton Controls Plant, West Plains, Missouri. As you will note, this facility is not an uncontrolled site and the recommendation is for no further action.

Should you have questions or comments, you are encouraged to contact Poplar Bluff Regional Office.

BM/rc

Attachments

MISSOURI DEPARTMENT OF NATURAL RESOURCES  
948 Lester Street  
Poplar Bluff, Missouri 63901 (314) 785-0832

Christopher S. Bond Governor  
Fred A. Lafser Director  
Poplar Bluff Regional Office



R00056961  
RCRA Records Center

## UNCONTROLLED HAZARDOUS WASTE SITE INVESTIGATION

Eaton Controls Plant  
210 Allen Street  
West Plains, MO  
Howell County

### I. Investigator:

R. Bruce Martin, an Environmental Specialist with the Waste Management Unit of the Poplar Bluff Regional Office, Missouri Department of Natural Resources, has conducted this preliminary assessment.

### II. Date Investigation Initiated: December 28, 1983

Date Investigation Completed: February 14, 1984

### III. Background of the Investigation:

This facility notified the United States Environmental Protection Agency on August 18, 1980 of its hazardous waste activities. At that time, Mr. David Hughes of the Eaton Corporation, requested Interim Status for the West Plains Plant, as a generator, and as a treatment/storage/disposal site. Although he stressed that he believed that the plant did not meet the definition of a generator or TSD Facility at the time, it was the company's belief that in a "healthier business cycle" they might so qualify. On October 31, 1980, U. S. Environmental Protection Agency sent an "Acknowledgement of Notification of Hazardous Waste Activity" Notice concerning the West Plains Plant to Eaton Corporation Divisional Headquarters in Carol Stream, Illinois. On August 4, 1982, as a result of file review, U. S. Environmental Protection Agency notified Eaton Corporation, West Plains Plant, that a "Part A" Application for hazardous waste storage had not been submitted, as required. On August 20, 1982, Joline Jacobs of Eaton Corporation, Carol Stream, Illinois, replied to the U. S. Environmental Protection Agency. Ms. Jacobs made reference to a May 5, 1981 letter of correspondence addressed to "RCRA Activities", Chicago, in which the company requested a review of their status and a deletion for TSD designation in West Plains. On August 27, 1982, per U. S. Environmental Protection Agency internal memo, the TSD designation for West Plains was amended to classify the West Plains facility, as a generator only.

IV. Identity of Persons Interviewed for this Report:

- Clark A. Webster, Plant Manager, Eaton Corporation of West Plains, 210 Allen Street, West Plains, Missouri (417)256-7171.
- Alvin Moss, Acting Materials Supervisor, Eaton Corporation, 210 Allen Street, West Plains, Missouri (417)256-7171

V. Brief Summary of Information Obtained:

This site is a RCRA regulated facility and appears to have no past history of the improper handling of hazardous wastes.

VI. Detailed Account of the Investigation:

A file search was conducted at the Poplar Bluff Regional Office concerning the activities of this facility. The company's RCRA inspection file, relevant air pollution control files, West Plains wastewater file, and West Plains Sanitary Landfill file were reviewed.

In a telephone conversation on February 14, 1984 with Mr. Alvin Moss, Acting Materials Supervisor, Eaton Plant, West Plains, it was learned that this facility has operated since 1970. The only waste stream currently generated by the company is spent trichlorethylene, purchased under the trade name Perm-A-Chlor NA, which is used as a degreasing solvent for metal parts, prior to zinc plating. It is currently reclaimed by resource recovery. Previous one time only disposal of a cyanide sludge from the zinc plating operation was disposed of at the Kansas Industrial Environmental Service Facility in August 1981. According to Alvin Moss, this sludge represented the accumulation of years of operation of 1970 to August 1981. Since then, a plating solution has been used containing non-hazardous bearing waste compounds.

Mr. Moss indicated that to the best of his knowledge, all wastes generated by Eaton Corporation, West Plains, have received proper disposal. He is not aware of any hazardous type wastes receiving disposal on company property.

VII. Conclusion and Recommendations:

Since this site is currently regulated by RCRA, and indications are that hazardous wastes generated by this facility have been properly handled, now and in the past, it is recommended that this facility be removed from any further investigations, as an uncontrolled hazardous waste site.

VIII. List of Appendices to this Report:


Attachment #1 - City Map locating site.

Attachment #2 - References

Attachment #3 - EPA Forms :

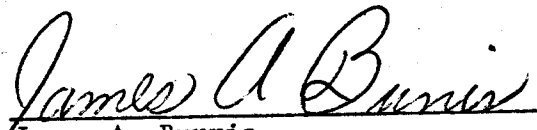
IX. Signatures:

SUBMITTED BY:

  
\_\_\_\_\_  
Bruce Martin  
Environmental Specialist  
Waste Management Unit  
Poplar Bluff Regional Office  
Missouri Dept. of Natural Resources

March 1, 1984  
Date

APPROVED BY:

  
\_\_\_\_\_  
James A. Burris  
Regional Administrator  
Poplar Bluff Regional Office  
Missouri Dept. of Natural Resources

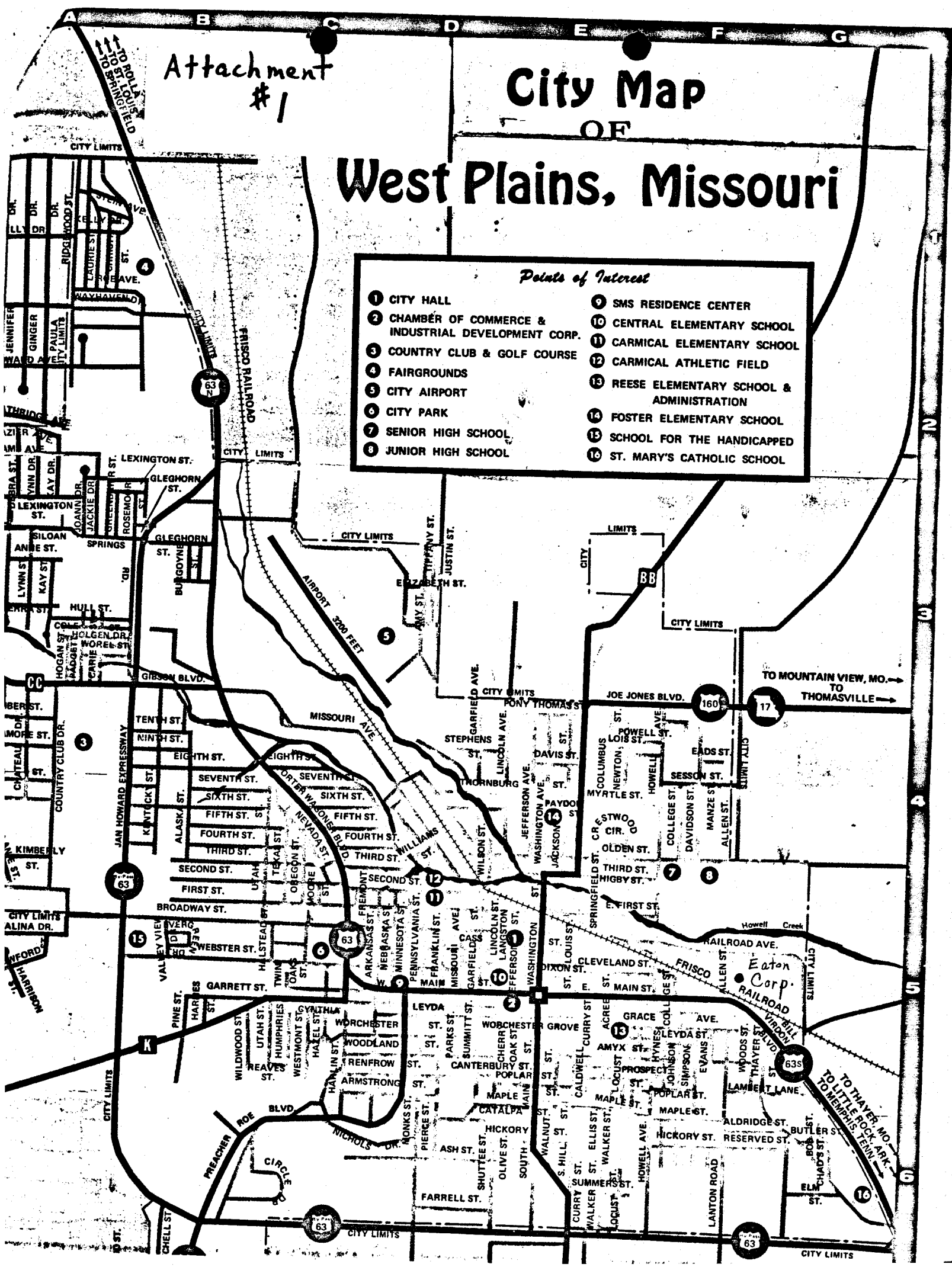
March 1, 1984  
Date

Attachment  
#1

# City Map OF West Plains, Missouri

## Points of Interest

- |  |   |
|--|---|
| 1 CITY HALL  | 9 SMS RESIDENCE CENTER                      |
| 2 CHAMBER OF COMMERCE & INDUSTRIAL DEVELOPMENT CORP. | 10 CENTRAL ELEMENTARY SCHOOL                |
| 3 COUNTRY CLUB & GOLF COURSE                         | 11 CARMICAL ELEMENTARY SCHOOL               |
| 4 FAIRGROUNDS  | 12 CARMICAL ATHLETIC FIELD                  |
| 5 CITY AIRPORT                                       | 13 REESE ELEMENTARY SCHOOL & ADMINISTRATION |
| 6 CITY PARK  | 14 FOSTER ELEMENTARY SCHOOL                 |
| 7 SENIOR HIGH SCHOOL                                 | 15 SCHOOL FOR THE HANDICAPPED               |
| 8 JUNIOR HIGH SCHOOL                                 | 16 ST. MARY'S CATHOLIC SCHOOL               |



ATTACHMENT #2

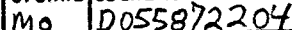
REFERENCES

RCRA Inspection File - 3.500 HOWELL COUNTY, Eaton Controls Plant

Attachment #3

"No Action Needed"

EPA		POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 1 - SITE INFORMATION AND ASSESSMENT		I. IDENTIFICATION	
01 SITE NAME (Legal, common, or descriptive name of site)		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER		01 STATE	02 SITE NUMBER
EATON CONTROLS PLANT		210 Allen Street		MO	D055872204
03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
West Plains	MO	65775	Howell	091	8
09 COORDINATES		09 LONGITUDE		10 PHONE NUMBER	
36° 43' 45" N		91° 50' 20" W		Phone (417) 256-7171	
10 DIRECTIONS TO SITE (Starting from nearest public road)					
Located on 210 Allen Street as per attached portion of city of West Plains Map.					
III. RESPONSIBLE PARTIES					
01 OWNER (if known)		02 STREET (Business, mailing, residential)			
EATON CORPORATION		100 ERIE VIEW PLAZA			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER		
CLEVELAND	OH	44114	(216) 523-5000		
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
Same					
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER		
			( )		
13 TYPE OF OWNERSHIP (Check one)					
<input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL					
<input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)					
<input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: 8/12/80 MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR <input checked="" type="checkbox"/> C. NONE					
IV. CHARACTERIZATION OF POTENTIAL HAZARD					
01 ON SITE INSPECTION		BY (Check all that apply)			
<input type="checkbox"/> YES DATE _____ MONTH DAY YEAR		<input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR			
<input checked="" type="checkbox"/> NO		<input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)			
02 SITE STATUS (Check one)		03 YEARS OF OPERATION			
<input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		1970 _____ BEGINNING YEAR    _____ ENDING YEAR <input type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED					
D/N/A					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION					
D/N/A					
V. PRIORITY ASSESSMENT					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)					
<input type="checkbox"/> A. HIGH (inspection required promptly) <input type="checkbox"/> B. MEDIUM (inspection required) <input type="checkbox"/> C. LOW (inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
VI. INFORMATION AVAILABLE FROM					
01 CONTACT		02 OF (Agency/ Organization)		03 TELEPHONE NUMBER	
Alvin Moss		EATON CONTROLS PLANT		(417) 256-7171	
04 PERSON RESPONSIBLE FOR ASSESSMENT		05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
R. Bruce Martin		MO DNR	DEQ	(314) 785-0832	2/18/84 MONTH DAY YEAR



## EPA FORM 2070-12 (7-81)





POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
MO D055872204

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

D/N/A



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

MO D055872204

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills, runoff, standing liquids, leaking drums)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

04 NARRATIVE DESCRIPTION

D/N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

D/N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

NONE

III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

IV. COMMENTS

This facility has been determined to be a RCRA regulated facility and is not an uncontrolled site.

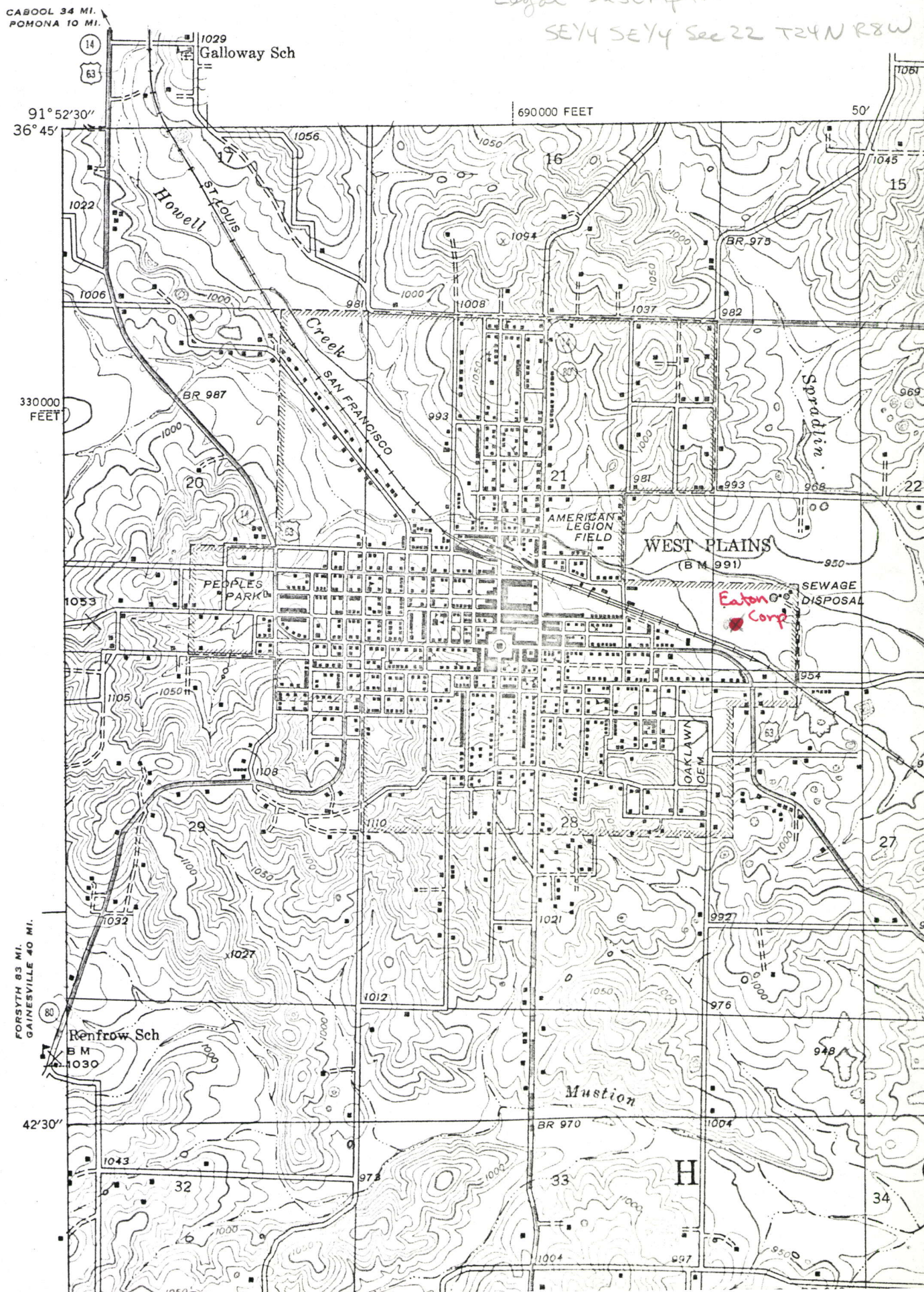
V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

RCRA file for Eaton Controls and information obtained from Alvin Moss, Acting Materials Manager.



## Legal Description

SE 1/4 SE 1/4 Sec 22 T24N R8W





File  
↓

		<b>POTENTIAL HAZARDOUS WASTE SITE</b> <b>FINAL DISPOSITION</b> <b>PART 1 - SITE STATUS</b>		<b>I. IDENTIFICATION</b> 01 STATE <b>MO</b> 02 SITE NUMBER <b>D055872204</b>	
<b>II. SITE NAME AND LOCATION</b>					
01 SITE NAME (Legal, common, or descriptive name of site) <b>Eaton Corp. - Controls Div.</b>			02 STREET, ROUTE NO., OR OTHER SPECIFIC LOCATION IDENTIFIER <b>210 Allen St.</b>		
03 CITY <b>West Plains</b>		04 STATE <b>MO</b>	05 ZIP CODE <b>65775</b>	06 COUNTY <b>Howell</b>	07 COUNTY CODE <b>091</b>
08 CONG DIST <b>8</b>					
<b>III. CURRENT SITE STATUS</b>					
01 REPORTING DATE <b>04 / 16 84</b> <small>MONTH DAY YEAR</small>					
02 TRACKING COMPLETED (Check one if applicable)					
<input checked="" type="checkbox"/> A. SITE REQUIRED NO RESPONSE <input type="checkbox"/> B. ALL GOVERNMENT FINANCED ACTIVITIES COMPLETED <input type="checkbox"/> C. ALL PRIVATELY FINANCED ACTIVITIES COMPLETED <input type="checkbox"/> D. SITE CLOSED					
DATE CLOSED <b>02 / 14 84</b> <small>MONTH DAY YEAR</small>		DATE COMPLETED <small>MONTH DAY YEAR</small>		DATE COMPLETED <small>MONTH DAY YEAR</small>	
		DATE COMPLETED <small>MONTH DAY YEAR</small>		DATE CLOSED <small>MONTH DAY YEAR</small>	
TOTAL COST <small>MONTH DAY YEAR</small>					
03 PENDING (Check if applicable)					
<input type="checkbox"/> FURTHER RESEARCH AND ANALYSIS REQUIRED             EXPECTED COMPLETION DATE <small>MONTH DAY YEAR</small>					
REFERENCE					
04 MONITORING (Check if applicable)					
<input type="checkbox"/> SITE REQUIRES CONTINUED SURVEILLANCE/MONITORING             SCHEDULE <input type="checkbox"/> A. MONTHLY <input type="checkbox"/> B. SEMI ANNUALLY <input type="checkbox"/> C. QUARTERLY <input type="checkbox"/> D. ANNUALLY					
REFERENCE					
05 FULL FIELD INVESTIGATION (Check one if applicable)					
<input type="checkbox"/> A. NEEDED <input type="checkbox"/> B. IN PROGRESS <input type="checkbox"/> C. COMPLETED             DATE COMPLETED <small>MONTH DAY YEAR</small>					
06 REMEDIAL RESPONSE (Check one if applicable)					
<input type="checkbox"/> A. NEEDED <input type="checkbox"/> B. IN PROGRESS <input type="checkbox"/> C. COMPLETED             DATE COMPLETED <small>MONTH DAY YEAR</small>					
07 PLANNED REMOVAL (Check one if applicable)					
<input type="checkbox"/> A. NEEDED <input type="checkbox"/> B. IN PROGRESS <input type="checkbox"/> C. COMPLETED             DATE COMPLETED <small>MONTH DAY YEAR</small>					
08 IMMEDIATE REMOVAL (Check one if applicable)					
<input type="checkbox"/> B. IN PROGRESS <input type="checkbox"/> C. COMPLETED             DATE COMPLETED <small>MONTH DAY YEAR</small>					
09 RESPONSIBLE PARTIES (Check if applicable)					
<input type="checkbox"/> RESPONSE/REMOVAL ACTIVITIES UNDER CONTROL OF RESPONSIBLE PARTIES					
10 ENFORCEMENT (Privately financed removal/response activities linked to enforcement are carried in the Enforcement Docket System)					
<input type="checkbox"/> A. ADMINISTRATIVE ORDER ISSUED <input type="checkbox"/> B. CIVIL/CRIMINAL LITIGATION FILED					
DATE ISSUED <small>MONTH DAY YEAR</small>		DATE FILED <small>MONTH DAY YEAR</small>			
COMPLIANCE DATE <small>MONTH DAY YEAR</small>		WHERE FILED <small>(Judicial District)</small>			
		JUDGEMENT/SETTLEMENT DATE <small>MONTH DAY YEAR</small>			
<b>IV. SITE RANKING</b>					
01 SITE RANKING AVAILABLE (Check one)					02 STATE PRIORITY
<input type="checkbox"/> A. YES RANKING: _____ <input type="checkbox"/> B. NO <input type="checkbox"/> C. PLANNED <input type="checkbox"/> D. UNNECESSARY <input type="checkbox"/> E. UNKNOWN					
<b>V. SOURCES OF INFORMATION</b> (Cite specific references, e.g., state files, sample analysis, reports)					
Preliminary Assessment received from Bruce Martin, PBR0. The assessment was completed on February 14, 1984.					
<b>VI. INFORMATION AVAILABLE FROM</b>					
01 PREPARED BY <b>June Sullens</b>		02 AGENCY <b>WMP</b>	03 ORGANIZATION <b>MDNR</b>	04 TELEPHONE NO. <b>(314) 751-3241</b>	05 DATE <b>04 / 16 84</b> <small>MONTH DAY YEAR</small>



POTENTIAL HAZARDOUS WASTE SITE  
CURRENT DISPOSITION  
PART 2 - GOVERNMENT FINANCED RESPONSE/REMOVAL ACTIVITIES

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. RESPONSE/REMOVAL ACTIVITIES

01 TYPE OF ACTIVITY (Check one)

☐ A. REMEDIAL RESPONSE ☐ B. PLANNED REMOVAL ☐ C. IMMEDIATE REMOVAL

02 RESPONSE/REMOVAL ACTIVITY

03 LEAD AGENCY

04 PARTICIPATING AGENCIES

05 START DATE

06 EST. COMP. DATE

07 ACTUAL COMP. DATE

08 ESTIMATED COST

09 ACTUAL COST

MONTH DAY YEAR

MONTH DAY YEAR

MONTH DAY YEAR

10 SOURCES OF FUNDING

A. SOURCE AMOUNT B. SOURCE AMOUNT

11 NARRATIVE DESCRIPTION

12 SOURCE OF INFORMATION

01 TYPE OF ACTIVITY (Check one)

☐ A. REMEDIAL RESPONSE ☐ B. PLANNED REMOVAL ☐ C. IMMEDIATE REMOVAL

02 RESPONSE/REMOVAL ACTIVITY

03 LEAD AGENCY

04 PARTICIPATING AGENCIES

05 START DATE

06 EST. COMP. DATE

07 ACTUAL COMP. DATE

08 ESTIMATED COST

09 ACTUAL COST

MONTH DAY YEAR

MONTH DAY YEAR

MONTH DAY YEAR

10 SOURCES OF FUNDING

A. SOURCE AMOUNT B. SOURCE AMOUNT

11 NARRATIVE DESCRIPTION

12 SOURCE OF INFORMATION

01 TYPE OF ACTIVITY (Check one)

☐ A. REMEDIAL RESPONSE ☐ B. PLANNED REMOVAL ☐ C. IMMEDIATE REMOVAL

02 RESPONSE/REMOVAL ACTIVITY

03 LEAD AGENCY

04 PARTICIPATING AGENCIES

05 START DATE

06 EST. COMP. DATE

07 ACTUAL COMP. DATE

08 ESTIMATED COST

09 ACTUAL COST

MONTH DAY YEAR

MONTH DAY YEAR

MONTH DAY YEAR

10 SOURCES OF FUNDING

A. SOURCE AMOUNT B. SOURCE AMOUNT

11 NARRATIVE DESCRIPTION

12 SOURCE OF INFORMATION

01 TYPE OF ACTIVITY (Check one)

☐ A. REMEDIAL RESPONSE ☐ B. PLANNED REMOVAL ☐ C. IMMEDIATE REMOVAL

02 RESPONSE/REMOVAL ACTIVITY

03 LEAD AGENCY

04 PARTICIPATING AGENCIES

05 START DATE

06 EST. COMP. DATE

07 ACTUAL COMP. DATE

08 ESTIMATED COST

09 ACTUAL COST

MONTH DAY YEAR

MONTH DAY YEAR

MONTH DAY YEAR

10 SOURCES OF FUNDING

A. SOURCE AMOUNT B. SOURCE AMOUNT

11 NARRATIVE DESCRIPTION

12 SOURCE OF INFORMATION